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Jerome Donally
11/17/05*

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	09/741,311
	Filing Date	12/19/05 or 12/23/04
	First Named Inventor	Zai Hamayun Ahmad
	Title	Martial Arts Scoring System
	Art Unit	
	Examiner Name	Jerome Donally
	Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Practitioners associated with the Customer Number:

09/741,311

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ZAI CORP - TREASURER	

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Zai Hamayun Ahmad

Date

2/4/05

Name

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Title and Company

Zai Corp

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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